

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

#13105

SERIAL NO. 10/718,321 | FILING DATE

APPLICANT(S)

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1			
2	1		1			
3	1		1			
4	3		1			
5	3		1			
6	3		3			
7	3		3			
8	1		1			
9	1		1			
10	1	#	1	#		
11	3		3			
12	3					
13	3					
14	3					
15	3					
16	3					
17	3					
18	3					
19	3					
20	3					
21	3					
22	3					
23			1			
24			1			
25			1			
26			1			
27			1			
28			1			
29			1			
30			1			
31			1			
32			1			
33			1			
34			1			
35			1			
36			1			
37			1			
38			1			
39			1			
40			1			
41			1			
42			1			
43			1			
44			1			
45			1			
46			1			
47			1			
48			1			
49			1			
50			1			
TOTAL IND.	5		5			
TOTAL DEP.	49	→	30	→		
TOTAL CLAIMS	54	[REDACTED]	35	[REDACTED]		

CLAIMS

51	IND	DEP	IND	DEP	IND	DEP
52						
53						
54						
55						
56						
57						
58						
59						
60						
61						
62						
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93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.			1			
TOTAL DEP.			1			
TOTAL CLAIMS			1			